



INTELLECTUAL PROPERTY DEPARTMENT
HUNTON & WILLIAMS LLP
1900 K STREET, N.W.
WASHINGTON, D.C. 20006-1109

TEL 202 • 955 • 1500
FAX 202 • 778 • 2201

TYLER MADDRY
DIRECT DIAL: 202-955-1964
EMAIL: TMADDRY@HUNTON.COM

FILE NO: 60497.000015

September 24, 2003

UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket Number: **60497.000015**
First Named Inventor: **Kelly Alan Stonger**
Title: **System and Method for Producing a Detector Position Map**
Customer No. **21967**

TO: **MAIL STOP PATENT APPLICATION**
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Attached are the following for filing with the U.S. Patent and Trademark Office:

1. ☒ Fee Transmittal Form (original and duplicate)
2. ☐ Small Entity Status Claimed: ☐ Independent Inventor
☐ Small Business Concern
☐ Non-Profit Organization
- ☐ Statement Enclosed
- ☐ Statement Filed in Prior Application; Status Still Proper and Desired
3. ☒ Specification - Total Pages: 23 (Including Abstract)

ATLANTA AUSTIN BANGKOK BRUSSELS CHARLOTTE DALLAS HONG KONG KNOXVILLE
LONDON MCLEAN MIAMI NEWYORK NORFOLK RALEIGH RICHMOND SINGAPORE WASHINGTON
www.hunton.com

16834 U.S. PTO
10/668167



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CLAIMS AS FILED						
	Claims Filed	Basic Fee Claims	Extra	Rate		Amount
				Large Entity	Small Entity	
Total Claims	21	20	1	\$ 18.00	\$ 9.00	\$ 18.00
Independent Claims	6	3	3	\$ 84.00	\$ 42.00	\$ 252.00
First Presentation of Multiple Dependent Claims				\$ 280.00	\$ 140.00	\$ 0.00
BASIC FEE				\$ 750.00	\$ 375.00	\$ 750.00
TOTAL FILING FEE						\$ 0.00
Assignment Recordation Fee						\$ 40.00
TOTAL AMOUNT						\$ 1,060.00

4. ☒ Drawings - Total Sheets: 12 (Fig(s). 1-15)
5. Oath or Declaration - Total Pages: 4
- a. ☒ Newly executed (original or copy)
☐ New (unexecuted)
- b. ☐ Copy from a prior application
(for continuation/divisional with Box 18 completed)
- i. ☐ DELETION OF INVENTOR(s):
Signed statement attached deleting inventor(s) named in prior application.
6. ☐ Application Data Sheet
7. ☐ CD-ROM or CD-R in duplicate, large table or Microfiche Computer Program (Appendix)
8. ☐ Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
- a. ☐ Computer Readable Form (CRF)
- b. ☐ Specification Sequence Listing on:
- i. ☐ CD-ROM or CD-R (two copies); or



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Page 3

- ii. ☐ Paper Copy (identical to computer copy)
- c. ☐ Statements verifying identity of above copies
9. ☒ Assignee/Applicant: **GE Medical Systems Global Technology Co., LLC**
- ☒ Assignment and Assignment Recordation Form Submitted Herewith
- ☐ Assignee of Record in Prior Application No. _____ :

recorded on _____ at Reel _____, Frame _____.
10. ☐ 37 C.F.R. 3.73(b) Statement ☐ Power of Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement with PTO-1449 and References
- ☐ Copies of Information Disclosure Statement Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard
15. ☐ Priority is Claimed as Follows:

- ☐ Claim Benefit of the Following U.S. Provisional Application No(s).:

- ☐ If Foreign Priority is Claimed, Certified Copy of the Above Priority Document(s) is Submitted Herewith
16. ☐ Nonpublication Request under 35 U.S.C. § 122(b)(2)(B)(i). Applicant must attach Form PTO/SB/35 or its equivalent.
17. ☐ Other: _____



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18. ☐ Continuation ☐ Divisional ☐ Continuation-in-Part of
Prior Application No.: _____ filed _____

Prior application information: Examiner _____ Group Art Unit _____

☐ Incorporation By Reference (useable if Box 5b is marked)
The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 5b, is considered as being part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application papers.

☐ Complete Application Based on Provisional Application No.: _____
filed _____

19. Please address all correspondence to:

☒ **CUSTOMER NUMBER 21967**

Tyler Maddy
Intellectual Property Department
Hunton & Williams LLP
1900 K Street, N.W.
Suite 1200
Washington, DC 20006-1109

20. ☐ A new power of attorney or authorization of agent (PTO/SB/81) is as follows:

☐ The power of attorney is to:

☐ Please add as power of attorney:

21. ☒ Please charge any discrepancies to **Deposit Account No. 070845** (Access Code 7197).

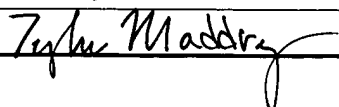


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September 24, 2003
Page 5

Respectfully submitted,

By: Tyler Maddy
Tyler Maddy
Registration No. 40,074

Enclosures

FEE TRANSMITTAL MAIL STOP Patent Application			Complete If Known																																																				
			Application No.		New																																																		
			Filing Date		9/24/03																																																		
			First Named Inventor		Kelly Alan Stonger																																																		
			Examiner Name		To Be Assigned																																																		
			Group Art Unit		To Be Assigned																																																		
Total Amount Of Payment		(\$)		1,060.00		Attorney Docket No.		60497.000015																																															
METHOD OF PAYMENT (check one)						FEE CALCULATION (continued)																																																	
1. <input checked="" type="checkbox"/> The Commissioner for Patents is hereby authorized to charge indicated fees and credit any over payments to Deposit Account No. 070845 (Access Code is 7197) in the name of GE Medical Systems.						3. ADDITIONAL FEES <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Fee Description</th> <th style="text-align: right;">Fee Paid</th> </tr> <tr><td><input type="checkbox"/> Surcharge - late filing fee or oath</td><td style="text-align: right;">\$</td></tr> <tr><td><input type="checkbox"/> Surcharge - late provisional filing fee or cover sheet</td><td style="text-align: right;">\$</td></tr> <tr><td><input type="checkbox"/> _____ Month Extension of Time</td><td style="text-align: right;">\$</td></tr> <tr><td><input type="checkbox"/> Notice of Appeal</td><td style="text-align: right;">\$</td></tr> <tr><td><input type="checkbox"/> Filing Brief in Support of Appeal</td><td style="text-align: right;">\$</td></tr> <tr><td><input type="checkbox"/> Request for Oral Hearing</td><td style="text-align: right;">\$</td></tr> <tr><td><input type="checkbox"/> Utility Issue Fee (or Reissue) (including Publication Fee, if necessary)</td><td style="text-align: right;">\$</td></tr> <tr><td><input type="checkbox"/> Design Issue Fee</td><td style="text-align: right;">\$</td></tr> <tr><td><input type="checkbox"/> Plant Issue Fee</td><td style="text-align: right;">\$</td></tr> <tr><td><input type="checkbox"/> Petition to Commissioner</td><td style="text-align: right;">\$</td></tr> <tr><td><input type="checkbox"/> Petition to Revive (Unavoidable)</td><td style="text-align: right;">\$</td></tr> <tr><td><input type="checkbox"/> Petition to Revive (Unintentional)</td><td style="text-align: right;">\$</td></tr> <tr><td><input type="checkbox"/> Petitions Related to Provisional Applications</td><td style="text-align: right;">\$</td></tr> <tr><td><input type="checkbox"/> Submission of Information Disclosure Statement</td><td style="text-align: right;">\$</td></tr> <tr><td><input type="checkbox"/> Filing Submission After Final Rejection</td><td style="text-align: right;">\$</td></tr> <tr><td><input checked="" type="checkbox"/> Recording Each Patent Assignment Per Property</td><td style="text-align: right;">\$ 40.00</td></tr> <tr><td><input type="checkbox"/> Filing Request for Reexamination</td><td style="text-align: right;">\$</td></tr> <tr><td><input type="checkbox"/> Other (specify) _____</td><td style="text-align: right;">\$</td></tr> </table>						Fee Description	Fee Paid	<input type="checkbox"/> Surcharge - late filing fee or oath	\$	<input type="checkbox"/> Surcharge - late provisional filing fee or cover sheet	\$	<input type="checkbox"/> _____ Month Extension of Time	\$	<input type="checkbox"/> Notice of Appeal	\$	<input type="checkbox"/> Filing Brief in Support of Appeal	\$	<input type="checkbox"/> Request for Oral Hearing	\$	<input type="checkbox"/> Utility Issue Fee (or Reissue) (including Publication Fee, if necessary)	\$	<input type="checkbox"/> Design Issue Fee	\$	<input type="checkbox"/> Plant Issue Fee	\$	<input type="checkbox"/> Petition to Commissioner	\$	<input type="checkbox"/> Petition to Revive (Unavoidable)	\$	<input type="checkbox"/> Petition to Revive (Unintentional)	\$	<input type="checkbox"/> Petitions Related to Provisional Applications	\$	<input type="checkbox"/> Submission of Information Disclosure Statement	\$	<input type="checkbox"/> Filing Submission After Final Rejection	\$	<input checked="" type="checkbox"/> Recording Each Patent Assignment Per Property	\$ 40.00	<input type="checkbox"/> Filing Request for Reexamination	\$	<input type="checkbox"/> Other (specify) _____	\$						
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<input type="checkbox"/> Other (specify) _____	\$																																																						
2. <input type="checkbox"/> Check Enclosed. The Commissioner for Patents is hereby authorized to charge any variance between the amount enclosed and the Patent Office charges to Deposit Account No. 50-0206 in the name of Hunton & Williams LLP, 1900 K Street, N.W., Suite 1200, Washington, D.C. 20006-1109.						<table style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: center;">FEE CALCULATION</th> </tr> <tr> <td style="width: 30%;">1. BASIC FILING FEE</td> <td style="width: 30%;"> <input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity </td> <td style="width: 40%; text-align: right;"> FEE PAID Utility Filing Fee \$ 750.00 Design Filing Fee \$ Plant Filing Fee \$ Reissue Filing Fee \$ Provisional Filing Fee \$ </td> </tr> </table>						FEE CALCULATION			1. BASIC FILING FEE	<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity	FEE PAID Utility Filing Fee \$ 750.00 Design Filing Fee \$ Plant Filing Fee \$ Reissue Filing Fee \$ Provisional Filing Fee \$																																						
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2. EXTRA CLAIMS FEES						<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="7" style="text-align: center;">CLAIMS AS AMENDED</th> </tr> <tr> <th rowspan="2">For</th> <th rowspan="2">Number Present</th> <th rowspan="2">Highest Number Paid For</th> <th rowspan="2">Extra</th> <th colspan="2">Rate</th> <th rowspan="2">Amount</th> </tr> <tr> <th>Large Entity</th> <th>Small Entity</th> </tr> <tr> <td>TOTAL CLAIMS</td> <td style="text-align: center;">21</td> <td style="text-align: center;">20</td> <td style="text-align: center;">1</td> <td style="text-align: center;">x \$</td> <td style="text-align: right;">18.00</td> <td style="text-align: right;">\$ 18.00</td> </tr> <tr> <td>INDEPENDENT CLAIMS</td> <td style="text-align: center;">6</td> <td style="text-align: center;">3</td> <td style="text-align: center;">3</td> <td style="text-align: center;">x \$</td> <td style="text-align: right;">84.00</td> <td style="text-align: right;">\$ 252.00</td> </tr> <tr> <td colspan="4">MULTIPLE DEPENDENT CLAIMS</td> <td></td> <td style="text-align: right;">\$ 280.00</td> <td style="text-align: right;">\$ 140.00</td> </tr> <tr> <td colspan="6">TOTAL EXTRA CLAIMS FEES</td> <td style="text-align: right;">\$ 270.00</td> </tr> </table>						CLAIMS AS AMENDED							For	Number Present	Highest Number Paid For	Extra	Rate		Amount	Large Entity	Small Entity	TOTAL CLAIMS	21	20	1	x \$	18.00	\$ 18.00	INDEPENDENT CLAIMS	6	3	3	x \$	84.00	\$ 252.00	MULTIPLE DEPENDENT CLAIMS					\$ 280.00	\$ 140.00	TOTAL EXTRA CLAIMS FEES						\$ 270.00
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SUBMITTED BY								Complete (if applicable)																																															
Typed or Printed Name		Tyler Maddy				Registration No.		40,074																																															
Signature						Date		September 24, 2003																																															